BEST AVAILABLE COPY ----

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000													
OLAMIC AC FILED DADT I													
		CLAINS AS	-					MALL EN YPE □	ITITY □	OR	OTHER SMALL E		
TOTAL CLAIMS			19				Γ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	SASIC FEE	355.00	OR	BASIC FEE	· 710.00	
TOTAL CHARGEABLE CLAIMS			/9 minus 20=		. 0		Γ	X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			<i>2</i> minus 3 =		. 0		t	X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM P			RESENT				f	+135=			+270=		
* If the difference in column 1 is			less than zero, enter "0" in column 2				L	TOTAL	700	OR OR	TOTAL		
,	CI	LAIMS AS A	- PAR				IOIAL	353	JOH	OTHER	THAN		
	<u> </u>	(Column 1)		(Colu	mn 2)	(Column 3)	umn 3) SMALL		ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		=		X40=		OR	X80=		
تا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l	+135=			+270=		
								TOTAL	* *	OR	TOTAL		
		(Column 1) (Column 2) (Column 3)								OR	ADDIT. FEE	L	
<u> </u>		CLAIMS]	HIG	HEST		1 г		ADDI-	1		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREV	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	٠	Minus	**	····	=	11	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	T CL AINA	= (-)	4 [X40=		OR	X80=		
L	FIRST PRESE	NTATION OF M	JUITPLE DEF	PENDEN	CLAIM		┛	+135=		OR	+270=		
							L	TOTAL		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								DDIT. FEE			ADDIT. FEE		
l _o		CLAIMS REMAINING		HIG	HEST MBER	PRESENT	ÌΓ		ADDI-	1		ADDI-	
AMENDMENT C		AFTER AMENDMENT	:	PREV	OUSLY FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=	1	X\$ 9=	4	OR	X\$18=		
	Independent	•	Minus	***		=]	X40=			X80=		
L	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	IT CLAIM		┇┞	+135=		OR	<u> </u>	:	
	* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=		
**	** If the ntry in column 1 is less than the entry in column 2, write "U" in column 3. ** If the "Highest Number Pr vi usly Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "High st Number Previously Paid F r" IN THIS SPACE is less than 3, enter "3." Th "Highest Number Pr viously Paid F r" (T tall or Independent) is the highest number found in the appropriate box in column 1.												